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Date:	November 21, 2005	Time:	4:40 PM	No. of Pages Transmitted:	9
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Comments:

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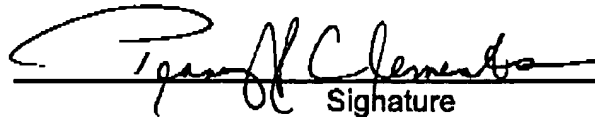
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*Amendment (total 5 pages);

*Amendment Transmittal Letter (total 1 page);

*Petition for 1 Mo. EOT w/authorization to Charge Deposit Account \$60 filing fee (1 page)

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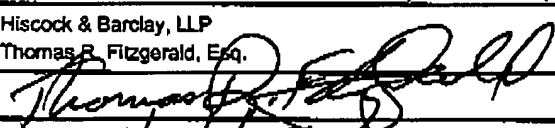
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/764,830
	Filing Date	January 26, 2004
	First Named Inventor	William J. Cultrara
	Art Unit	
	Examiner Name	Lars Olson
Total Number of Pages in This Submission	Attorney Docket Number	20011.000201

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (___ pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Petition for Extension of Time (1 Mo.) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) (#0058-2005) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Executed Declaration with Power of Attorney (total 3 pages) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <u>X</u> The fee in the amount of \$60 is to be paid as follows: The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to, Deposit Account No. 50-3010.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Hiscock & Barclay, LLP Thomas R. Fitzgerald, Esq.
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